Fill	in this inform	ation to identify your	case:			
Deb	otor 1	JOHN M ARCHIE	Middle Name	Last Name		
Deb	otor 2	riistivame	Middle Name	Last Name		
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Banl	kruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
1	se number					
(if kn	own)				_	eck if this is an ended filing
-						g
∩f	ficial For	m 106Sum				
			and Liabilities ar	nd Certain Statistical Information		12/15
Be a	s complete ar	nd accurate as possib ut all of your schedul	le. If two married people es first; then complete the	e are filing together, both are equally responsible to ne information on this form. If you are filing amend to the box at the top of this page.		
Par		rize Your Assets	,,			
i ai	ounniu	TIEC TOUT AGGETS			Vau	v
						r assets e of what you own
1.		B: Property (Official Fo			•	404 000 00
	1a. Copy line	55, Total real estate, for	rom Schedule A/B		\$_	191,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$_	13,756.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$_	204,756.00
Par	t 2: Summa	rize Your Liabilities				
					You	r liabilities
						ount you owe
2.			laims Secured by Property		\$	219,234.00
		•		the bottom of the last page of Part 1 of Schedule D	Ψ_	
3.			Unsecured Claims (Officiand (Officiand (Officiand (Officiand (Official (Offi	ıl Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$_	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured o	elaims) from line 6j of Schedule E/F	\$	123.375.00
	, ,			, ,	· -	1_0,01010
				Your total liabilities	s \$	342,609.00
Par	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo			\$	4,119.28
_		·		o /	Ψ_	.,
5.		Your Expenses (Official onthly expenses from li			\$_	4,000.00
Par	t 4: Answer	These Questions for	Administrative and Stat	istical Records		
6.	Are you filing	g for bankruptcy und	er Chapters 7, 11, or 13?			
0.	•		•	heck this box and submit this form to the court with ye	our other	schedules.
	Yes					
7.	What kind of	debt do you have?				
				debts are those "incurred by an individual primarily fog for statistical purposes. 28 U.S.C. § 159.	r a persor	nal, family, or
		bts are not primarily twith your other sched		ve nothing to report on this part of the form. Check th	is box and	d submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 JOHN M ARCHIE Case number (if known)

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,044.08

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	102,450.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	102,450.00

Debt (Spous	or 2 se, if filing)	First Name	Middle	e Name	Last Name			
Unite	ed States Banl	kruptcy Court for	the: SOUTHER	N DISTI	RICT OF MISSISSIPPI			
Case	e number							☐ Check if this is an amended filing
Sc n eac hink i	hedule h category, sep it fits best. Be	as complete and a space is needed, a	operty escribe items. List	le. If two	only once. If an asset fits in more than or married people are filing together, both ar his form. On the top of any additional page	e equally resp	onsible for su	pplying correct
	you own or ha No. Go to Part 2 Yes. Where is t	2.	uitable interest in a		ence, building, land, or similar property?			
1.1	No. Go to Part 2 Yes. Where is t	the property?			ence, building, land, or similar property? is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	t of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
1.1	No. Go to Part 2 Yes. Where is t	he property?		What	Sis the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount Creditors V Current va entire prop	t of any secured who Have Clair lilue of the perty?	d claims on Schedule D:
1.1	No. Go to Part 2 Yes. Where is t 142 SEVILL Street address, if a	he property? E WAY available, or other des	eription 39110-0000	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop	t of any secured who Have Clair lue of the perty? 31,000.00 the nature of yee simple, tense), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$191,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	otor 1 J	OHN M ARCHIE		Case number (if known)	
3. C	ars, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
] No				
	Yes				
3.1	1 Make:	NISSAN	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on <i>Schedule D</i> :
	Model:	ALTIMA	Debtor 1 only		e Claims Secured by Property.
	Year:	2015	_ Debtor 2 only	Current value of the	
		nate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		GED OFF - BUT	At least one of the debtors and another		
		TOR NEVER REPOED	Check if this is community property (see instructions)	Unknov	<u>Unknown</u>
5 / Part	pages you	have attached for Part 2. Wri	own for all of your entries from Part 2, including te that number hered Items Interest in any of the following items?		\$0.00 Current value of the portion you own? Do not deduct secured
I		goods and furnishings Major appliances, furniture, line	ens, china, kitchenware		claims or exemptions.
	⊒ No ■ Yes. De	scribe			
	. 00. 20				
		HOUSEHOLD	GOODS		\$1,000.00
	Electronics Examples: ☐ No ☐ Yes. De	Televisions and radios; audio, vincluding cell phones, cameras	video, stereo, and digital equipment; computers, pri , media players, games TOPS, PLAYSTATION, IPAD, CELL PHONE		llections; electronic devices \$1,000.00
	Collectible: Examples: ■ No □ Yes. De	Antiques and figurines; painting other collections, memorabilia,	gs, prints, or other artwork; books, pictures, or other collectibles	r art objects; stamp, coin,	or baseball card collections;
9. E	Equipment Examples:	for sports and hobbies Sports, photographic, exercise, musical instruments	and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	nd kayaks; carpentry tools;
L	☐ Yes. De	SCHDe			
	Firearms Examples	: Pistols, rifles, shotguns, ammo	unition, and related equipment		

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Debtor 1	JOHN M ARCHIE	Case nu	umber (if known)	
■ Yes. D	escribe			
	<u> </u>			****
	SMITH & WESSON	AR15		\$800.00
				*
	REMINGTON 306			\$350.00
	SMITH & WESSON	9M		\$400.00
11. Clothes Example □ No ■ Yes. D	s: Everyday clothes, furs, leather coats	, designer wear, shoes, accessories		
				4500 00
	CLOTHES			\$500.00
■ No □ Yes. D 13. Non-farm Example ■ No □ Yes. D	escribe animals s: Dogs, cats, birds, horses escribe	engagement rings, wedding rings, heirloom jewelry, wedding rings, heirloom jewelry, wedding rings, heirloom jewelry, wedding any health aids you		ivei
■ No □ Yes. G	ive specific information			
	dollar value of all of your entries from 3. Write that number here	om Part 3, including any entries for pages you hav	re attached	\$4,050.00
Part 4: Desci	ribe Your Financial Assets			
Do you own	or have any legal or equitable intere	st in any of the following?	,	Current value of the cortion you own? On not deduct secured claims or exemptions.
□ No	s: Money you have in your wallet, in yo	ur home, in a safe deposit box, and on hand when yo	u file your petition	
		Cas	sh	\$6.00
17. Deposits Example ☐ No	s: Checking, savings, or other financial	accounts; certificates of deposit; shares in credit unic unts with the same institution, list each.	ons, brokerage houses	s, and other similar
■ Yes		Institution name:		
	CREDIT UN 17.1. CHECKING		RAL CU	\$200.00

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De	ebtor 1 JOHN M AR	RCHIE	Case number (if known)	
18.		or publicly traded stocks	kerage firms, money market accounts	
	■ No	s, investment accounts with bron	rerage lims, money market accounts	
	☐ Yes	Institution or issuer n	name:	
19.	joint venture	tock and interests in incorpo	rated and unincorporated businesses, including an interest i	n an LLC, partnership, and
	■ No			
	☐ Yes. Give specific in	formation about them Name of entity:	 % of ownership:	
20.	Negotiable instrument	s include personal checks, cash	iable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	■ No			
	☐ Yes. Give specific int	formation about them Issuer name:		
21.	□ No ′	IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	Yes. List each accou	nt separately. Type of account:	Institution name:	
		STATE RETIRMENT	PEERS	\$8,000.00
_				
	Examples: Agreement ☐ No ☐ Yes	s with landlords, prepaid rent, p	oublic utilities (electric, gas, water), telecommunications companie Institution name or individual:	s, or others
		Rental deposit	AUTUMN CHASE PROPERTIES	\$1,500.00
23.	•	for a periodic payment of money	y to you, either for life or for a number of years)	
	■ No □ Yes	ssuer name and description.		
		•		
24.	26 U.S.C. §§ 530(b)(1),	ion IRA, in an account in a qu 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition progr	am.
	■ No □ Yes	nstitution name and description.	. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fo	uture interests in property (ot	her than anything listed in line 1), and rights or powers exerc	isable for your benefit
	☐ Yes. Give specific in	formation about them		
26.		rademarks, trade secrets, and main names, websites, proceed	d other intellectual property ds from royalties and licensing agreements	
	☐ Yes. Give specific in	formation about them		
27.	Examples: Building pe	and other general intangibles rmits, exclusive licenses, coope	s erative association holdings, liquor licenses, professional licenses	
	■ No□ Yes. Give specific in	formation about them		
M	oney or property owed	to vou?		Current value of the
141	ones or property owed	, , , , , , , , , , , , , , , , , ,		portion you own?

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	ebtor 1	JOHN M ARCHIE		Case number (if known)	
28.	Tax ref	unds owed to you			
	■ No				
	⊔ Yes.	Give specific information	on about them, including whether y	ou already filed the returns and the tax years	
29.		support oles: Past due or lump	sum alimony, spousal support, child	d support, maintenance, divorce settlement, property	settlement
	■ No				
	☐ Yes.	Give specific information	on		
30.				lity benefits, sick pay, vacation pay, workers' comper	nsation, Social Security
		Give specific informat	tion		
31.	Interes	ts in insurance polici	ies		
	Examp			count (HSA); credit, homeowner's, or renter's insuran	ce
	■ No □ Yes	Name the insurance or	ompany of each policy and list its va	alue	
	00.		Company name:	Beneficiary:	Surrender or refund value:
32.	If you a		t is due you from someone who haliving trust, expect proceeds from a	has died a life insurance policy, or are currently entitled to rece	eive property because
	☐ Yes.	Give specific informat	tion		
	Examp ■ No		yment disputes, insurance claims, o	lawsuit or made a demand for payment or rights to sue	
34.	Other o	contingent and unliqu	uidated claims of every nature, in	cluding counterclaims of the debtor and rights to	set off claims
	_	Describe each claim			
35	Any fin	ancial assets you did	d not already list		
	■ No	,	,,		
	☐ Yes.	Give specific informat	tion		
36				ding any entries for pages you have attached	\$9,706.00
Pa	rt 5: Des	scribe Any Business-Re	elated Property You Own or Have an Ir	nterest In. List any real estate in Part 1.	
37.	Do you o	own or have any legal or	r equitable interest in any business-re	elated property?	
ı	No. Go	to Part 6.			
[☐ Yes. G	So to line 38.			
Pa			ommercial Fishing-Related Property Y st in farmland, list it in Part 1.	You Own or Have an Interest In.	
46.	Do you	own or have any leg	gal or equitable interest in any far	m- or commercial fishing-related property?	
	■ No.	Go to Part 7.			
	☐ Yes.	. Go to line 47.			
P.a	rt 7:	Describe All Bronerty	You Own or Have an Interest in That	You Did Not List Abovo	

Official Form 106A/B

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Debte	or 1 JOHN M ARCHIE		Case number (if known)	
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$191,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$4,050.00		
58.	Part 4: Total financial assets, line 36	\$9,706.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,756.00	Copy personal property to	stal \$13,756.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$204,756.00

311	in this information to i	identify your cas	e :				
		M ARCHIE	c.				
00.	First Nam		Middle Name	L	ast Name		
	otor 2 use if, filing) First Nam	ne	Middle Name	L	ast Name		
Uni	ted States Bankruptcy C	Court for the: S	OUTHERN DISTRICT OF	MISS	ISSIPPI		
	se number						Check if this is an amended filing
	ficial Form 10 chedule C:		erty You Cla	aim	as Exempt		4/19
the nee	property you listed on So	chedule A/B: Prop	erty (Official Form 106A/B) as yo	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as ex	cempt. If more space is
spe any func exe	cific dollar amount as o applicable statutory lii Is—may be unlimited i	exempt. Alternat mit. Some exemp n dollar amount.	ively, you may claim the otions—such as those fo	full fai r healt	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain b aption of 100% of fair market valu	ing exemp enefits, an	ted up to the amount of d tax-exempt retirement
	ne applicable statutory	amount.		ty is d	letermined to exceed that amoun	, your exe	
Pai	t 1: Identify the Pro	amount. perty You Claim	as Exempt		letermined to exceed that amoun	, your exe	
Pai	t 1: Identify the Pro Which set of exemption	amount. perty You Claim ons are you claim	as Exempt ning? Check one only, eve	en if yo	letermined to exceed that amount	t, your exe	
Pai	t 1: Identify the Pro Which set of exemptic You are claiming sta	amount. perty You Claim ons are you claim te and federal nor	as Exempt ning? Check one only, eventons.	en if yo	letermined to exceed that amount	t, your exe	
Par 1.	t 1: Identify the Pro Which set of exemptic You are claiming sta	amount. perty You Claim ons are you claim te and federal nor eral exemptions.	as Exempt ning? Check one only, events as the control of the cont	en if yo	Dur spouse is filing with you. S.C. § 522(b)(3)	t, your exe	
Par 1.	t 1: Identify the Pro Which set of exemptic You are claiming sta	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on	as Exempt ning? Check one only, even nbankruptcy exemptions. 11 U.S.C. § 522(b)(2) A/B that you claim as ex	en if yo	letermined to exceed that amount		
Par 1.	t1: Identify the Pro Which set of exemptio You are claiming sta You are claiming fed For any property you Brief description of the p	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on	as Exempt ning? Check one only, eventhankruptcy exemptions. 11 U.S.C. § 522(b)(2) A/B that you claim as exemption as exemption as exemptions.	en if you	etermined to exceed that amount our spouse is filing with you. 6.C. § 522(b)(3) fill in the information below.		mption would be limited
Par 1.	t1: Identify the Pro Which set of exemption You are claiming state You are claiming fed For any property you is Brief description of the p Schedule A/B that lists the	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on is property	as Exempt ning? Check one only, eventhankruptcy exemptions. 11 U.S.C. § 522(b)(2) A/B that you claim as exemption you own Copy the value from	en if you	etermined to exceed that amount our spouse is filing with you. 6.C. § 522(b)(3) fill in the information below. bount of the exemption you claim	Specific la	mption would be limited
Par 1.	t1: Identify the Pro Which set of exemption You are claiming state You are claiming fed For any property you is Brief description of the p Schedule A/B that lists the	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on is property	as Exempt ning? Check one only, events as Exempt on the control of the control o	en if you	determined to exceed that amount our spouse is filing with you. 6.C. § 522(b)(3) fill in the information below. bount of the exemption you claim each only one box for each exemption.	Specific la	mption would be limited
Par 1.	te applicable statutory t1: Identify the Pro Which set of exemption ■ You are claiming sta □ You are claiming fed For any property you le Brief description of the p Schedule A/B that lists the HOUSEHOLD GOOI Line from Schedule A/E 6-TVs, 2-LAPTOPS,	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on is property DS 6.1	as Exempt ning? Check one only, eventhankruptcy exemptions. 11 U.S.C. § 522(b)(2) A/B that you claim as exemption you own Copy the value from Schedule A/B \$1,000.00	en if you	determined to exceed that amount our spouse is filing with you. S.C. § 522(b)(3) fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$1,000.00 100% of fair market value, up to	Specific la	mption would be limited
Par 1.	t1: Identify the Pro Which set of exemption You are claiming state You are claiming fed For any property you be Brief description of the p Schedule A/B that lists the HOUSEHOLD GOOI Line from Schedule A/E	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on is property DS 6.1	as Exempt ning? Check one only, events and check one	en if you	fill in the information below. Social Socia	Specific la	aws that allow exemption ode Ann. § 85-3-1(a)
Par 1.	t1: Identify the Pro Which set of exemption ■ You are claiming state □ You are claiming fed For any property you is Brief description of the p Schedule A/B that lists the HOUSEHOLD GOOI Line from Schedule A/E 6-TVs, 2-LAPTOPS, IPAD, CELL PHONE	amount. perty You Claim ons are you claim te and federal nor eral exemptions. list on Schedule roperty and line on his property DS 2: 6.1 PLAYSTATION 5: 7.1	as Exempt ning? Check one only, events and check one	en if you 11 U.S empt, Ama	determined to exceed that amount our spouse is filing with you. S.C. § 522(b)(3) fill in the information below. count of the exemption you claim each only one box for each exemption. \$1,000.00 100% of fair market value, up to any applicable statutory limit \$1,000.00 100% of fair market value, up to	Specific la	aws that allow exemption ode Ann. § 85-3-1(a)

Official Form 106C

CLOTHES

Line from Schedule A/B: 11.1

STATE RETIRMENT: PEERS

Line from Schedule A/B: 21.1

\$500.00

\$8,000.00

Miss. Code Ann. § 85-3-1(a)

Miss. Code Ann. § 25-11-201

\$500.00

\$8,000.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

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Deb	otor 1	JOHN M ARCHIE	Case number (if known)	
3.	,	you claiming a homestead exemption of more than \$170,350? ect to adjustment on 4/01/22 and every 3 years after that for case		
		No		
		Yes. Did you acquire the property covered by the exemption within	n 1,215 days before you filed this case?	
	J	□ No		
	ı	□ Yes		

Fill in this information to identify yo	ur case:			
Debtor 1 JOHN M ARCH	IE			
First Name	Middle Name Last Nam	е		
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	Δ	-	
(Spouse II, IIIIIIg) I list Name	Wildlie Name Last Nam	6		
United States Bankruptcy Court for the	e: SOUTHERN DISTRICT OF MISSISSIPE	יו		
Casa numbar				
Case number(if known)			☐ Check	if this is an
			_	led filing
				9
Official Form 106D				
Schedule D. Creditors	s Who Have Claims Secu	red by Propert	V	12/15
Scriedale D. Creditor.	3 WIIO Have Claims Secu	red by 1 Topert	<u>y </u>	12/13
	. If two married people are filing together, both a			
is needed, copy the Additional Page, fill II number (if known).	out, number the entries, and attach it to this for	m. On the top of any additio	nai pages, write your na	me and case
1. Do any creditors have claims secured I	ov vour property?			
	this form to the court with your other schedule	s You have nothing else t	o report on this form	
	·	o. Tou have nothing close t	o report on the form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims		0.1	0.1. 0	0.1.0
	more than one secured claim, list the creditor separ		Column B	Column C
for each claim. If more than one creditor hamuch as possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. tical order according to the creditor's name.	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	and order decorating to the creation of harmon	value of collateral.	claim	If any
2.1 SERVISOLUTIONS	Describe the property that secures the claim:	\$191,192.00	\$191,000.00	\$192.00
Creditor's Name	142 SEVILLE WAY Madison, MS			
2000 INTERSTATE PARK D	39110 Madison County			
STE 408	As of the date you file, the claim is: Check all the	at .		
Montgomery, AL 36123	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
7,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage of	or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
$\hfill\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 03	55		
	-			
2.2 SERVISOLUTIONS	Describe the property that secures the claim:	\$4,746.00	\$191,000.00	\$4,746.00
Creditor's Name	142 SEVILLE WAY Madison, MS	7 .,		
2000 INTERSTATE PARK	39110 Madison County			
D	As of the date you file, the claim is: Check all the			
STE 408	apply.	at		
Montgomery, AL 36123	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt2 of	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage of car leap)	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt	— Other (including a right to offset)			
·				
Date debt was incurred	Last 4 digits of account number 02	34		

Official Form 106D

Coco number (::)

Debior I JOHN W ARCHIE	· · · · · · · · · · · · · · · · · · ·	Case Hulliber (ir known)		
First Name Middle N	lame Last Name	_		
2.3 WELLS FARGO DEALER	Describe the property that secures the claim:	\$23,296.00	Unknown	Unknown
Creditor's Name	2015 NISSAN ALTIMA			
	CHARGED OFF - BUT CREDITOR			
	NEVER REPOED			
PO BOX 10709	As of the date you file, the claim is: Check all that			
Raleigh, NC 27605	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 0454			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$219,234.00	$\overline{\square}$	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$219,234.00	•	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Dobtor 1 JOHN M ADOLUE

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in	this information to identify your	case:	
Debtor	JOHN M ARCHIE		
	First Name	Middle Name Last Name	
Debtor (Spouse		Middle Name Last Name	
United	States Bankruptcy Court for the:	SOUTHERN DISTRICT OF MISSISSIPPI	
Case r	number		
(if known)		☐ Check if this is an
			amended filing
∩ffici	al Form 106E/F		
		ho Have Unsecured Claims	12/15
			rt 2 for creditors with NONPRIORITY claims. List the other party to
Schedul left. Atta name ar	le D: Creditors Who Have Claims Se ach the Continuation Page to this pa and case number (if known).	ured by Property. If more space is needed, copy th le. If you have no information to report in a Part, do	ny creditors with partially secured claims that are listed in e Part you need, fill it out, number the entries in the boxes on the onot file that Part. On the top of any additional pages, write your
Part 1:			
_	any creditors have priority unsecure	d claims against you?	
	No. Go to Part 2.		
	Yes.		
Part 2:			
_	any creditors have nonpriority unse		
Ц	No. You have nothing to report in this	art. Submit this form to the court with your other sched	ules.
	Yes.		
uns	secured claim, list the creditor separate n one creditor holds a particular claim,	y for each claim. For each claim listed, identify what type	nolds each claim. If a creditor has more than one nonpriority be of claim it is. Do not list claims already included in Part 1. If more have nonpriority unsecured claims fill out the Continuation Page of
			Total claim
4.1	ALLY FINANCIAL	Last 4 digits of account number	1836 \$3,705.00
	Nonpriority Creditor's Name	When we the debt in some 10	
	PO BOX 380901 Minneapolis, MN 55438	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply
	Who incurred the debt? Check one		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and ar	other Type of NONPRIORITY unsecured of	claim:
	☐ Check if this claim is for a com	munity	
	debt		tion agreement or divorce that you did not
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	plans, and other similar debts
	■ No		'
	☐ Yes	Other. Specify REPOSSISO	<u>N</u>

Debto	r 1 JOHN M ARCHIE	Case number (if known)	
4.2	CENTERPOINT ENERGY ENT	Last 4 digits of account number 6920	\$103.00
	Nonpriority Creditor's Name PO BOX 1700	When was the debt incurred?	
	Houston, TX 77251		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify UNSECURED DEBT	
4.3	COMCAST	Last 4 digits of account number 1585	\$1,469.00
	Nonpriority Creditor's Name		. ,
	1225 W. 5TH ST	When was the debt incurred?	
	Laurel, MS 39440 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The or allo date you may also distant to officer and that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify UNSECURED DEBT	
4.4	CONN CREDIT CORP	Last 4 digits of account number 6230	\$2,476.00
	Nonpriority Creditor's Name		
	PO BOX 2358	When was the debt incurred?	
	Beaumont, TX 77704 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date year me, the order is officer an that appry	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Πyos	■ ou ou v LINSECLIRED DERT	

Debtor	1 JOHN M ARCHIE	Case number (if known)	
4.5	DEPT OF ED/NAVIENT	Last 4 digits of account number 7702	\$72,540.00
	Nonpriority Creditor's Name C/O US. ATTORNEY 2015 15TH ST	When was the debt incurred?	
	Gulfport, MS 39501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		STUDENT LOAN	
4.6	DEPT OF ED/NAVIENT Nonpriority Creditor's Name	Last 4 digits of account number 4274	\$29,910.00
	C/O US. ATTORNEY 2015 15TH ST Gulfport, MS 39501	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loansObligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No Yes	Other. Specify	
	Li les	STUDENT LOAN	
4.7	DISCOVER FIN SVCS LLC	Last 4 digits of account number 3375	\$7,302.00
	Nonpriority Creditor's Name PO BOX 15316 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify UNSECURED DEBT	

Debto	or 1 JOHN M ARCHIE	Case number (if known)	
4.8	FIRST PREMIER BANK Nonpriority Creditor's Name	Last 4 digits of account number 9847	\$634.00
	PO BOX 5529 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify UNSECURED DEBT	
4.9	MS POWER	Last 4 digits of account number 5247	\$359.00
	Nonpriority Creditor's Name PO BOX 245	When was the debt incurred?	
	Birmingham, AL 35201		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify UNSECURED DEBT	
4.1	TOWER LOAN	Last 4 digits of account number 6644	¢4.977.00
0	Nonpriority Creditor's Name	Last 4 digits of account number 6644	\$4,877.00
	PO BOX 320001 Flowood, MS 39232	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify CHARGE OFF	
Part 3	List Others to Be Notified About a De	bt That You Already Listed	
is try have	ying to collect from you for a debt you owe to se more than one creditor for any of the debts that	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if omeone else, list the original creditor in Parts 1 or 2, then list the collection agency here at you listed in Parts 1 or 2, list the additional creditors here. If you do not have addition	e. Similarly, if you
Name	fied for any debts in Parts 1 or 2, do not fill out of and Address VERGENT	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check one):	

PO BOX 9004

Official Form 106 E/F

Debtor 1 JOHN M ARCHIE	Case number (if known)
Renton, WA 98057	Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
		The same and the priority and could be same.		Ψ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					T. () O ()
	6f.	Student loans	6f.	\$	Total Claim
Total	01.	Student loans	OI.	Φ	102,450.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	· ——	
		here.		\$	20,925.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	123,375.00

Fill in this infor	mation to identify your	case:		
Debtor 1	JOHN M ARCHIE			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

PROGRESSIVE LEASING 256 WEST DATA DR Draper, UT 84020 **RENTAL LEASE**

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Fill in this	information to identify your	case:			
Debtor 1	JOHN M ARCHIE				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Cta	stop Bonkeruntou Court for the	COLITUEDA DICTRICT	OF MICCICCIDDI		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case num	ber				
(if known)					☐ Check if this is an
			<u> </u>		amended filing
Officia	l Form 106H				
	dule H: Your Cod	ebtors			12/15
501100	idio III. I dai daa				12/13
fill it out, a		boxes on the left. Attach	the Additional Page to		eded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes	s				
Arizor	thin the last 8 years, have you ha, California, Idaho, Louisiana, . Go to line 3. s. Did your spouse, former spouse.	Nevada, New Mexico, Pu	erto Rico, Texas, Washii		states and territories include
in line Form out C	e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2.	f that person is a guaran	tor or cosigner. Make s	sure you have listed the SG). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				□ Sahadula D. lina	
	Name			_ ☐ Schedule D, line☐ Schedule E/F, lin	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your c	250.				1				
	btor 1 JOHN M AR									
	otor 2 ouse, if filing)									
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	T OF MISSISSIPPI							
	se number nown)					□ A		ed filing ent showir	ng postpetition	
\bigcirc	fficial Form 106I					_			following date:	
	chedule I: Your Inc	ome				M	IM / DD/ Y	/YYY		12/15
sup spo atta	as complete and accurate as pose plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your th you, do not incl	spouse ude infor	is liv mati	ing with on about	you, incl your spo	ude infor ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	filing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not e	mployed		
	employers.	Occupation	FOOTBALL CO	ACH						
	Include part-time, seasonal, or self-employed work.	Employer's name	GULFPORT SO DISTRICT	HOOL						
	Occupation may include student or homemaker, if it applies.	Employer's address	PO BOX 220 Gulfport, MS 3	9503						
		How long employed the	here? 1 YRS				_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	space. In	iclude your noi	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	on for all	empl	oyers for	that perso	on on the I	lines below. If	you need
						For Dek	otor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6	,044.08	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	6,04	14.08	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	JOHN M ARCHIE	-		Case	e number (if known)				
					Fo	r Debtor 1			ebtor	2 or spouse	
	Сор	y line 4 here	4.		\$_	6,044.08	3	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	944.27	,	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k		\$	543.97	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00)	\$		N/A	<u> </u>
	5e.	Insurance	56	€.	\$	360.00)	\$		N/A	
	5f.	Domestic support obligations	5f		\$_	0.00)	\$		N/A	<u> </u>
	5g.	Union dues	50	g.	\$_	0.00	_	\$		N/A	_
	5h.	Other deductions. Specify: DENTAL	_ 5h	า.+	\$_	76.56	<u> </u>	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,924.80)_	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,119.28	3	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0,		¢	0.00		¢		N1/ 0	
	8b.	Interest and dividends	8k	a.	\$ \$	0.00	_	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_ \$	0.00	_	\$		N/A	_
	8d.	Unemployment compensation	80		\$	0.00	_	\$		N/A	_
	8e.	Social Security	86	Э.	\$	0.00	_	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f 8g		\$_ \$	0.00 0.00	_	\$ \$		N/A N/A	_
	8h.	Other monthly income. Specify:		y. า.+		0.00		+ \$		N/A	_
	011.		_ "		<u> </u>	0.00	_	_		14/7	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	0.00)	\$		N/	Α
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		4,119.28 +	\$		N/A	= \$	4,119.28
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		4,110.20	_			-	4,110.20
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep					•	hedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	4,119.28
13.	Do	you expect an increase or decrease within the year after you file this form	?							Comb month	ined ly income
		No.									

Debtor 1 JOHN MARCHIE Debtor 2 Spouse; if lifting)	Fill	in this information to identify y	our case:					
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI Official Form 106J Schedule J: Your Expenses 12/11 Be as complete an accurate a spossible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Dees Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependents names. Daughter Daughter 4 Pyes Son Daughter 10 Yes Son Daughter 10 Yes Son Daughter 10 Yes No	Deb	otor 1 JOHN M AR	CHIE			Check	c if this is:	
Case number						_	ū	
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI Case number ((It known) Case number ((It known)								
Case number (It known) Common	``	· •	001171	IEDNI DIOTDIOT OF MICO	IOOIDD!	_	·	
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Dees Debtor 2 live in a separate household? No. Go to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependent snames. Daughter Daughter Daughter 10 Yes. Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses 12/15:	Unit	ed States Bankruptcy Court for th	e: SOUTE	HERN DISTRICT OF MISS	ISSIPPI	N	MM / DD / YYYY	
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Dees Debtor 2 live in a separate household? No Household of Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents hames. Daughter Daughter Daughter Daughter 10 Yes. Part Z: Estimate Your expenses include every expenses of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the value of such assistance and have included it on Schedule I: Your Income (Official Form 106J.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	1							
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Daughter Daught			■ Yes.					
dependents names. Daughter		Do not state the						□ No
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payments and any rent for the ground or lot. 4. \$	(Ott	ficial Form 106I.)					rour exp	enses
If not included in line 4:	4.			•	nclude first mortgage	4. \$		1,400.00
		If not included in line 4:						
4a. Real estate taxes 4a. \$ 0.00		4a. Real estate taxes				4a. \$		0.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00			's, or renter	's insurance				
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00								
4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00	5.				me equity loans			

Debto	or 1 JOHN	M ARCHIE	Case num	nber (if known)	
6. l	Utilities:				
-		city, heat, natural gas	6a.	\$	280.00
6	6b. Water,	sewer, garbage collection	6b.	\$	75.00
6	6c. Teleph	one, cell phone, Internet, satellite, and cable services	6c.	\$	160.00
6	6d. Other.	Specify: CABLE	6d.	\$	140.00
	GAS			\$	60.00
7. F	Food and ho	ousekeeping supplies	7.	\$	850.00
8. (Childcare ar	nd children's education costs	8.	\$	800.00
9. (Clothing, lau	ındry, and dry cleaning	9.	\$	30.00
10. F	Personal car	re products and services	10.	\$	30.00
11. I	Medical and	dental expenses	11.	\$	75.00
		on. Include gas, maintenance, bus or train fare.	40	Φ	100.00
		e car payments.	12.	·	100.00
		nt, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		ontributions and religious donations	14.	\$	0.00
-	Insurance.	a incurrence deducted from your new or included in lines 4 or 20			
	15a. Life ins	e insurance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
	15b. Health		15b.		0.00
	15c. Vehicle		15c.	· ———	0.00
		nsurance. Specify:	15d.	·	0.00
		ot include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify:	t motade taxes deducted from your pay or motaded in inice 4 of 20.	16.	\$	0.00
17. I	Installment of	or lease payments:			
1	17a. Car pa	yments for Vehicle 1	17a.	\$	0.00
1	17b. Car pa	yments for Vehicle 2	17b.	\$	0.00
1	17c. Other.	Specify:	17c.		0.00
1	17d. Other.	Specify:	17d.	\$	0.00
		nts of alimony, maintenance, and support that you did not repo			0.00
		om your pay on line 5, Schedule I, Your Income (Official Form 1	06I). 18.	·	0.00
		ents you make to support others who do not live with you.	10	\$	0.00
	Specify:	remarks expressed and included in lines 4 or 5 of this form or on	19.		
		roperty expenses not included in lines 4 or 5 of this form or on ages on other property	20a.		0.00
	20a. Mortga 20b. Real e		20a. 20b.	·	0.00
		ty, homeowner's, or renter's insurance	20b. 20c.		0.00
	•	nance, repair, and upkeep expenses	20d.	·	0.00
		owner's association or condominium dues	20d. 20e.		0.00
	Other: Speci			Ψ +\$	
	Other. Speci			-Ψ	0.00
22. (Calculate yo	ur monthly expenses			
2	22a. Add line	s 4 through 21.		\$	4,000.00
2	22b. Copy lin	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2	\$	
2	22c. Add line	22a and 22b. The result is your monthly expenses.		\$	4,000.00
2 1	Calculate vo	ur monthly net income.			
	-	ine 12 (your combined monthly income) from Schedule I.	23a.	\$	4,119.28
		rour monthly expenses from line 22c above.	23b.	· -	4,000.00
	200. Copy y	out monthly expenses from the 226 above.	230.	Ψ	4,000.00
2		ct your monthly expenses from your monthly income.	25	¢.	440.20
	The re	sult is your monthly net income.	23c.	\$	119.28
F	For example, d	ect an increase or decrease in your expenses within the year aft to you expect to finish paying for your car loan within the year or do you expect the terms of your mortgage?			rease or decrease because of a
		Evolois horo:			
L	☐ Yes.	Explain here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	JOHN M ARCHIE				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number _					
(if known)					Check if this is an
					amended filing
Declarat	tion About a	n Individual	Debtor's Scl	nedules	12/15
f two married pe	eople are filing together	r, both are equally respon	nsible for supplying corre	ect information.	
Vau muat fila thi	is form whonover you fi	la bankruntay aabadulaa	or amanded ashedulas	Making a false statement, con	acciling property or
				fines up to \$250,000, or impr	
	8 U.S.C. §§ 152, 1341, 1		.,,	, , , , , , , , , , , , , , , , , , ,	
Sim	n Balaw				
Sigi	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes. N	Name of person				tition Preparer's Notice,
				Declaration, and Signa	ature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
Y /s/ IOL	HN M ARCHIE		X		
	M ARCHIE		Signature of D	Debtor 2	
	re of Debtor 1		- 3		
Date I	May 21, 2019		Date		
24.0					

Debtor 1 JOHN M ARCHIE Feet Name							
Debtor 2 Spower (stimp) Tris Name Mode Name Last Name La							
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	Del	otor 1			Last Name		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI Case number Case number Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if income), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before Not married Not married Not married Not married Details all of the places you lived in the last 3 years. Do not include where you live now? Debtor 1 Prior Address: Dates Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 2 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Debtor 2 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 2 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 2 Not the places you lived in the last 3 years. Do not include where you live now. Debtor 2 Not the your lived in th							
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Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No Tyes. List all of the places you lived anywhere other than where you live now? Debtor 1 Prior Address: Debtor 1 Prior Address: Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Itwed there 142 SEVILLE WAY Magee, MS 39111 Debtor 3 Prior To: 1/2018 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income A. Did you have any income from employment or from operating a businesse, including part-time activities. If you are filing a joint case and you have ancome that you receive together, list it only once under Debtor 1. Debtor 1 Sources of Income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Gross Income Check all that apply. Gross Income Check all that apply. Gross Income Check all that apply. Gefore deductions and exclusions) bonuses, tips Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of i							
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Married Not married	Par	t 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before		
■ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? □ No ■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 □ Ilved there □ 142 SEVILLE WAY Magee, MS 39111 □ 02/2015 - □ 1/2018 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No □ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income Ch	1.	What is your	current marital statu	ıs?			
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No		■ Not marr	ied				
Pebtor 1 Prior Address: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 2 Ived there 142 SEVILLE WAY Magee, MS 39111 Debtor 3 Same as Debtor 1 From-To: 1/2018 Mithin the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips	2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
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lived there			. ,	·	·		Dates Debtor 2
Magee, MS 39111 02/2015 - 1/2018 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips		Debtor 1111	or Address.		Debiol 2 I Hol Ac	uicss.	
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Pert 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips		_			☐ Same as Debtor	I	
States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips		wagee, ws	39111				FIORI-TO:
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) \$60,454.00 Wages, commissions, bonuses, tips		es and territorie	es include Arizona, Ca	ılifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips	Par	t 2 Explain	the Sources of You	ır Income			
Test calendar year: (January 1 to December 31, 2018) Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Gross income (before deductions and exclusions) Uwages, commissions, bonuses, tips	4.	Fill in the total	amount of income yo	u received from all jobs and a	all businesses, including part	time activities.	ndar years?
Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Under the company of t		□ No					
Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$60,454.00 D Wages, commissions, bonuses, tips		Yes. Fill	in the details.				
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips Check all that apply. (before deductions and exclusions) The provided Head of the provided He				Debtor 1		Debtor 2	
exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips							
(January 1 to December 31, 2018) Wages, commissions, bonuses, tips				Check all that apply.		Check all that apply.	
(January 1 to December 31, 2018) Wages, commissions, bonuses, tips	For	· last calendar	vear:	Magaz as marianiana	,	☐ Wages commissions	,
☐ Operating a business ☐ Operating a business				_	ψου,ποπιου	_	
				☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	ebtor 1 JC	HN M AR	CHIE				Cas	se number (if known)		
				Debtor 1				Debtor 2		
				Sources of it Check all that		Gross in (before d exclusion	eductions and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r the calendary 1 to			■ Wages, co			\$51,390.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating	a business			☐ Operating a	business	
5.	Include inc and other winnings.	come regard public bene If you are fil	dless of whet fit payments; ing a joint ca	her that income pensions; renta se and you have	l income; interes income that you	nples of <i>ot</i> st; dividend u received	her income are a ds; money colled together, list it	alimony; child supp	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
	_	Fill in the de	etails.							
				Debtor 1				Debtor 2		
				Sources of ir Describe belo		each sou	eductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	yments You	ı Made Before `	ou Filed for Ba	ankruptcy	,			
.	□ No.	Neither Deindividual During the No. Yes	ebtor 1 nor I primarily for a 90 days before Go to line List below paid that controlled	Debtor 2 has prapersonal, familiary personal, familiary processing	y, or household bankruptcy, did y whom you paid a clude payments attorney for this	ner debts. purpose." you pay an a total of \$ s for domes b bankrupt	ny creditor a tota 66,825* or more stic support obli cy case.	al of \$6,825* or mor	re? ments and t ild support a	1(8) as "incurred by an he total amount you and alimony. Also, do
	■ Yes.				imarily consum bankruptcy, did y		ny creditor a tota	al of \$600 or more?		
		■ No.	Go to line	7.						
		□ Yes	include pay		stic support obli			d the total amount poort and alimony.		t creditor. Do not include payments to an
	Creditor'	s Name and	d Address	Da	tes of payment	t T	otal amount paid	Amount you still owe	Was this p	payment for
7.	Insiders in of which y a business alimony.	clude your i	elatives; any ficer, directo	general partner r, person in cont	s; relatives of an rol, or owner of 2	ny general 20% or mo	partners; partners partners		u are a gene ny managing	ral partner; corporations agent, including one fo
	■ No □ Yes.	lietallnavm	nents to an ir	neider						
		Name and			tes of payment	t T	otal amount paid	Amount you still owe	Reason fo	or this payment
							•			

Del	otor 1 JOHN M ARCHIE			Cas	se number (if known)			
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.								
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dat	es of payment	Total amount paid	Amount still	t you owe		r this payment ditor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, an	d Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.								
	■ No □ Yes. Fill in the details.								
	Case title Case number						Status of the	he case	
10.	 Within 1 year before you filed for bankruptcy, was any of your property report Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 				oreclosed,		hed, attache		
	Creditor Name and Address		Describe the Property			Date		Value of the property	
	Ally Financial	•	Explain what happened			10/2018		Unknown	
	200 Renaissance Ctr Detroit, MI 48243	2013 CHEVY SILVERADO ■ Property was repossessed. □ Property was foreclosed. □ Property was garnished. □ Property was attached, seized or levied.				10/20			
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.			uding a bank or fir	nancial ins	titution	, set off any	amounts from your	
	Creditor Name and Address	Des	scribe the action the	creditor took		Date a	action was	Amount	
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 								
Par	t 5: List Certain Gifts and Contributions								
	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, d	lid you give any gifts	s with a total value	of more th	an \$600) per person	?	
	Gifts with a total value of more than \$600 per person		Describe the gifts			Dates the gi	you gave	Value	
	Person to Whom You Gave the Gift and					o gi			

Dei	JOHN W ARCHIE		Case number	(II KNOWN)					
14.	 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. 								
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value				
Pai	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankrup or gambling?	ptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,				
	■ No □ Yes. Fill in the details.								
	how the loss occurred	Includ	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending	Date of your loss	Value of property lost				
			nce claims on line 33 of Schedule A/B: Property.						
Par	t 7: List Certain Payments or Transfers	3							
16.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Varnado Law Firm 12178 Hwy 49 Ste. C Gulfport, MS 39503 varnadolawfirm@gmail.com		Description and value of any property transferred	Date payment Amo or transfer was paymade					
			Attorney Fees		\$999.00				
	DOLLAR LEARNING FND 21900 BURBANK BLVD STE 3097 Woodland Hills, CA 91367		CREDIT COUNSELING		\$20.00				
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	erty to anyone who				
	■ No								
	Yes. Fill in the details.		Description and value of a survey	Data was well	A				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Den	JUNI WI ARCHIE			Case Hull	ibei (ii kriowri)			
	Within 2 years before you filed for bankrup transferred in the ordinary course of your k Include both outright transfers and transfers m include gifts and transfers that you have already	ousiness or financial aff ade as security (such as	airs? the granting of a s	•				
	■ No □ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and property transfer		paym	ribe any property or ents received or debts	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.	ptcy, did you transfer a otection devices.)	ny property to a s	self-settle	d trust or similar device	of which you are a		
	Name of trust				sferred	Date Transfer was made		
Par	List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Unit	ts	mado		
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	ınts; certificates	of deposi		, ,		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
	CITIZEN NTL BANK 5917 US 49 Hattiesburg, MS 39402	XXXX-	■ Checking □ Savings □ Money Mark □ Brokerage □ Other	ngs ey Market erage				
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes, Fill in the details.	year before you filed fo	r bankruptcy, an	y safe de	posit box or other depos	itory for securities,		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit No Yes. Fill in the details.	or place other than you	r home within 1 y	year befo	re you filed for bankrupte	cy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		

Debtor 1 JOHN M ARCHIE Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) **DEBORAH ARCHIE** 14401 AUTUMN CHASE 2004 HONDA ACCORD Unknown 117 BRIDGEWALK DR Hattiesburg, MS 39406 Gulfport, MS 39503 Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No ☐ Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

Der	otor 1 JOHN M ARCHIE	Cas	se number (if known)
	No. None of the above applies. Go to Pa	art 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
	,	Name of accountant of bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties. No	cy, did you give a financial statement to an	nyone about your business? Include all financial
	☐ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are t with 18 U		false statement, concealing property, or ob	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
JO	HN M ARCHIE nature of Debtor 1	Signature of Debtor 2	
Dat	e _May 21, 2019	Date	
Did : ■ N	•	nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did :	you pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	forms?
ПΥ	es. Name of Person Attach the Bankrup	otcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

Fill in this inform				
Debtor 1	JOHN M ARCHIE			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number _				☐ Check if this is amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's SERVISOLUTIONS	■ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it.			
Description of 142 SEVILLE WAY Madison, MS	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes		
property 39110 Madison County securing debt:	☐ Retain the property and [explain]:	_		
Creditor's SERVISOLUTIONS	■ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it.	_		
Description of 142 SEVILLE WAY Madison. MS	☐ Retain the property and enter into a	☐ Yes		
Description of property 39110 Madison County securing debt:	Reaffirmation Agreement. Retain the property and [explain]:	_		
Creditor's WELLS FARGO DEALER	■ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it.			
Description of 2015 NISSAN ALTIMA	Retain the property and enter into a	☐ Yes		
property CHARGED OFF - BUT	Reaffirmation Agreement. Retain the property and [explain]:			
CREDITOR NEVER REPOED	Retain the property and [explain]:			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Debtor 1	JOHN M	ARCHIE	Case number (if know	n)
securi	ng debt:			_
Part 2:	List Your U	nexpired Personal Property Leases		
or any un the infe	nexpired per ormation belo	sonal property lease that you listed in ow. Do not list real estate leases. Une	Schedule G: Executory Contracts and Unexpi epired leases are leases that are still in effect; te trustee does not assume it. 11 U.S.C. § 365(p	he lease period has not yet ended.
Describe	your unexp	ired personal property leases		Will the lease be assumed?
Lessor's	name:	PROGRESSIVE LEASING		■ No
				☐ Yes
Descripti Property:	on of leased	RENTAL LEASE		
Part 3:	Sign Below			
		ıry, I declare that I have indicated my i ct to an unexpired lease.	ntention about any property of my estate that s	secures a debt and any personal
X /s/	JOHN M AR	CHIE	X	
	HN M ARCH		Signature of Debtor 2	
Sigr	nature of Debt	or 1		
Date	e May 2	1, 2019	Date	

Fill in this info	ormation to identify your case:				conly as d	irected in this form and	l in Form
Debtor 1	JOHN M ARCHIE		12:	2A-1Supp:			
Debtor 2 (Spouse, if filing)				☐ 1. There	is no pres	umption of abuse	
United States	Bankruptcy Court for the: Southern District	of Mississippi		applie	es will be n	o determine if a presur nade under <i>Chapter</i> 7	
Case number				☐ 3. The M	eans Test	icial Form 122A-2). does not apply now be	
				qualif	ied military	service but it could ap	ply later.
O((; : 1.1	- 1004 1			☐ Check	f this is a	n amended filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Cu	rrent Mor	nthly Inc	ome			12/15
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people ate sheet to this form. Include the line number to we f known). If you believe that you are exempted fro ary service, complete and file Statement of Exem, Calculate Your Current Monthly Income	which the addition om a presumption	nal information a of abuse becau	applies. On t use you do no	he top of aint	ny additional pages, writ narily consumer debts o	e your name and r because of
1. What is	your marital and filing status? Check one or	 nly.					
_	narried. Fill out Column A, lines 2-11.	•					
	ied and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
	ied and your spouse is NOT filing with you.						
	ving in the same household and are not leg	•	•	lumns A an	d B, lines 2	2-11.	
□ Liv pe	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are ring apart for reasons that do not include evadi	out Column A, lir legally separated	nes 2-11; do no I under nonbar	ot fill out Col akruptcy law	umn B. By that appli	checking this box, you es or that you and your	
Fill in the at 101(10A). Fithe 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-n s, add the income for all 6 months and divide the tota in the same rental property, put the income from that it	sources, derived nonth period would I by 6. Fill in the res	during the 6 full be March 1 through	II months being ugh August 3 de any incom	fore you file 1. If the amount m	e this bankruptcy case. A bunt of your monthly incomore than once. For examp	ne varied during le, if both
spouses ow	in the same remai property, put the income from that p	noperty in one core	anni oniy. Ii you i	Column A Debtor 1	o report for	Column B Debtor 2 or non-filing spouse	ace.
	oss wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$ 6,	044.08	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and room	unts from any source which are regularly por your dependents, including child support unmarried partner, members of your householmmates. Include regular contributions from a spont include payments you listed on line 3.	i. Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
	ome from operating a business, profession,						
			tor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
•	and necessary operating expenses	· —	Copy here ->	¢	0.00	\$	
	othly income from a business, profession, or fai	m \$	Copy nere ->	Ψ	0.00	Ψ	
6. Net inco	ome from rental and other real property	Deb	tor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
•	othly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	nouse	
8.	Unemployment compensation			\$	0.00	\$, , ,	
٠.	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benef	it under	· 	0.00	·		
	•	0.0	00					
	For you \$ For your spouse \$							
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	nount received that was	s a	\$	0.00	\$		
10	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	ts or					
	•			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	6,044.08	+\$_		= \$	6,044.08
Part	2: Determine Whether the Means Test Applies t	o You					incom	
40	Outside to see the second second by the second for the second	E-llaw than a stage						
12	Calculate your current monthly income for the year	•		_				
	12a. Copy your total current monthly income from line 1	11		Сор	y line 11 l	nere=>	\$	6,044.08
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	e form				12b.	\$	72,528.96
13	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	MS						
	riii iii tile state iii wilicii you live.	IVIO						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	pecified	in the separa	ate instruc	13. tions	\$	66,729.00
14	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is	no presum	ption of abuse		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption o	f abuse is	determined by	Form 1.	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement and	in any atta	achments is tru	e and c	orrect.
	X /s/ JOHN M ARCHIE JOHN M ARCHIE Signature of Debtor 1				·			
	Date May 21, 2019							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

JOHN M ARCHIE

Debtor 1

Debtor 1	JOHN M ARCHIE	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions Source of Income: Employer: GULFPORT SCHOOL DISTRICT Constant income of \$6,044.08 per month.*

Constant income of \$6,044.06 per month.

Debtor 1 JOHN M ARCHIE Case number (if known)

*Paycheck Details:

GULFPORT SCHOOL DISTRICT

Date	Earnings	Overtime	Taxes	Other	Net Check
2018-11-30	6,044.08	0.00	951.82	970.53	4,121.73
2018-12-28	6,044.08	0.00	951.82	970.53	4,121.73
2019-01-25	6,044.08	0.00	944.27	980.53	4,119.28
2019-02-28	6,044.08	0.00	944.27	980.53	4,119.28
2019-03-28	6,044.08	0.00	944.27	980.53	4,119.28
2019-04-30	6,044.08	0.00	944.27	980.53	4,119.28
Totals:	36,264.48	0.00	5,680.72	5,863.18	24,720.58

Fill	in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Deb	otor 1 JOHN M ARCHIE	ines 40 or 42.
		According to the calculations required by this
-	ouse, if filing)	Statement:
` .	ed States Bankruptcy Court for the: Southern District of Mississippi	■ 1. There is no presumption of abuse.
Coo	a number	☐ 2. There is a presumption of abuse.
1	e numbernown)	
		☐ Check if this is an amended filing
Of	ficial Form 122A - 2	g and a second g
	apter 7 Means Test Calculation	04/1
To fi	Il out this form, you will need your completed copy of Chapter 7 Statemen	at of Your Current Monthly Income (Official Form 122A-1)
	in out this form, you will need your completed copy of chapter 7 statemen	reor roar our ent monthly moonle (official Form 12224 1).
	s complete and accurate as possible. If two married people are filing toge	
	e is needed, attach a separate sheet to this form, Include the line number tional pages, write your name and case number (if known).	to which additional information applies. On the top any
Par	Determine Your Adjusted Income	
1.	Copy your total current monthly income. Copy line 11 from	om Official Form 122A-1 here=> \$ 6,044.08
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of your spo household expenses of you or your dependents. Follow these steps:	use's income not used to pay for the
	On line 11, Column B of Form 122A–1, was any amount of the income you re expenses of you or your dependents?	ported for your spouse NOT regularly used for the household
	■ No. Fill in 0 for the total on line 3.	
	☐ Yes. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
		\$
		¢
		\$
		\$
	Total	¢ 0.00
	Total.	\$
		Copy total here=> © 0.00

Official Form 122A-2

Adjust your current monthly income. Subtract line 3 from line 1.

6,044.08

art 2:	Calculate Your Deductions from Your Income							
to ar instr Dedu your	Internal Revenue Service (IRS) issues National and Laswer the questions in lines 6-15. To find the IRS staructions for this form. This information may also be a act the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. Due in line 3 and do not deduct any operating expenses the	ndards, go online available at the bar of your actual expe so not deduct any as	using the link specified in a skruptcy clerk's office. In later parts of the form t	the separate n, you will use some of ro your spouse's				
If you	ur expenses differ from month to month, enter the average	ge expense.						
Whe	never this part of the from refers to you, it means both you	ou and your spouse	if Column B of Form 122A-1	is filled in.				
5.	The number of people used in determining your ded	uctions from inco	me					
	Fill in the number of people who could be claimed as ex plus the number of any additional dependents whom you the number of people in your household.			4				
Natio	onal Standards You must use the IRS National	l Standards to ansv	ver the questions in lines 6-7					
7.	Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,786.00							
Peop	ole who are under 65 years of age							
	7a. Out-of-pocket health care allowance per person	\$ 55.00	-					
	7b. Number of people who are under 65	X4						
	7c. Subtotal. Multiply line 7a by line 7b.	\$	Copy here=> \$	220.00				
Peop	ole who are 65 years of age or older							
	7d. Out-of-pocket health care allowance per person	\$114.00	-					
	7e. Number of people who are 65 or older	xo						
	7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here=> +	0.00				
	7g. T otal. Add line 7c and line 7f		\$	Copy total here=> \$				

JOHN M ARCHIE

Loc	al St	andards	You mu	ust use th	e IRS Local	l Standards t	o ansv	wer the ques	tions in lir	nes 8-15.						
		n informa tcy purpo				Trustee Prog	gram l	has divided	the IRS I	Local Sta	andar	d for ho	using	for		
= +	lous	ing and u	tilities -	Insuranc	e and oper	rating expen	ises									
= +	lous	ing and u	tilities - l	Mortgage	e or rent ex	cpenses										
To a	answ	er the qu	estions i	in lines 8	-9, use the	U.S. Truste	e Pro	gram chart.								
						ed in the sep		instructions f	or this for	m.						
This	cha	rt may also	be avai	lable at th	ie bankrupt	cy clerk's offi	ice.									
8.						erating expe or insurance								fill \$		650.00
9.	Ηοι	ısing and	utilities	- Mortga	ge or rent	expenses:										
	9a.	-			•	ed in line 5, frent expense						\$	1,15	2.00		
	9b.	Total ave	erage mo	nthly pay	ment for all	mortgages a	and oth	ner debts sed	cured by	your hom	ie.					
		contractu	ually due		ecured cred	/ payment, additor in the 60										
		Name of	the credi	itor				Average mo	onthly							
		-NONE						\$								
								•	0.00	Сору		•		0.00	Repeat thi	
				i otai a	verage mo	nthly paymer	זנ	\$	0.00	here=	>	-\$		0.00	line 33a.	
	9c.	Net mort	gage or r	rent expe	nse.											
						<i>y payment</i>) fr s than \$0, ent				\$		1,152	.00	Copy here=>	\$	1,152.00
10.						m's division expenses, fil						is incor	rect an	nd	\$	0.00
	Ex	plain why:														
11.	Loc	al transp	ortation	expense	s: Check th	ne number of	vehicl	es for which	you claim	n an own	ership	or oper	ating e	xpense.		
). Go to lin	ıe 14.													
	•	I. Go to lin	ie 12.													
		2 or more.	Go to lin	e 12.												
12.						S Local Standosts that appl									\$	210.00

JOHN M ARCHIE

13.	You n		pense: Using the IRS Local if you do not make any loan o						
Ve	hicle 1	Describe Vehicle 1:	2015 NISSAN ALTIMA (NEVER REPOED	CHARGED OFF - BU	JT CRE	DITOR	R		
13a	. Owne	rship or leasing costs using	g IRS Local Standard		\$		508.00		
13b.		ge monthly payment for all tinclude costs for leased v	debts secured by Vehicle 1. rehicles.						
	are co		y payment here and on line 1 cured creditor in the 60 mont		at				
	1	Name of each creditor for	Vehicle 1	Average monthly payment					
	١	WELLS FARGO DEAL	ER .	\$\$					
		Total A	verage Monthly Payment	\$307.45	Copy here :		307	Repeat this amount on line 33b.	
13c.		ehicle 1 ownership or lease act line 13b from line 13a. i	e expense f this amount is less than \$0,	, enter \$0	\$		200.55	Copy net Vehicle 1 expense here => \$	200.55
Ve	hicle 2	Describe Vehicle 2:							
13d.	. Owne	rship or leasing costs using	g IRS Local Standard		\$		0.00		
13e.		ge monthly payment for all vehicles.	debts secured by Vehicle 2.	Do not include costs fo	r				
	1	Name of each creditor for	Vehicle 2	Average monthly payment					
	_			\$					
		Total A	verage Monthly Payment	\$	Copy here =>	-\$	0.0	Repeat this amount on line 33c.	
13f.		ehicle 2 ownership or lease act line 13e from line 13d. i	e expense f this amount is less than \$0,	, enter \$0	\$		0.00	Copy net Vehicle 2 expense here => \$	0.00
14.			: If you claimed 0 vehicles in ce regardless of whether you			andards	s, fill in the	Public \$	0.00
15.	also d	educt a public transportation	on expense: If you claimed 1 on expense, you may fill in wal Standard for <i>Public Trans</i>	hat you believe is the ap					217.00

JOHN M ARCHIE

Debtor 1 JOHN M ARCHIE Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.	\$	946.79
	Do not include real estate, sales, or use taxes.	Ψ	340.13
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	543.97
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:		
	as a condition for your job, or	\$	0.00
	■ for your physically or mentally challenged dependent child if no public education is available for similar services.	Ψ	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	Φ.	800.00
	Do not include payments for any elementary or secondary school education.	\$	000.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	6,726.31

Debtor 1 **JOHN M ARCHIE** Case number (if known) Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 356.67 Disability insurance 0.00 Health savings account 0.00 356.67 356.67 Total Copy total here=> Do you actually spend this total amount? No. How much do you actually spend? 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. 0.00 * Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 0.00 You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial 0.00 instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

32. Add all of the additional expense deductions.

Add lines 25 through 31.

356.67

\$

Debtor 1 JOHN M ARCHIE Case number (if known) **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Mortgages on your home: payment 33a. 0.00 Copy line 9b here Loans on your first two vehicles: 33b. Copy line 13b here 307.45 33c. Copy line 13e here 0.00 33d. List other secured debts: Name of each creditor for other secured debt Identify property that secures the debt Does payment include taxes or insurance? No -NONE-Yes No Yes No ☐ Yes Copy total 307.45 307.45 33e. Total average monthly payment. Add lines 33a through 33d here=> 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure** Monthly cure amount amount -NONE-\$ $\div 60 = $$ Сору total 0.00 0.00 \$ Total here=> 35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36.

0.00

☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims

0.00 \div 60 = \$

For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Basions</i> for this form. <i>Bankruptcy Basics</i> may also be available.	s <i>ics</i> spec					
■ No. □ Yes.	Go to line 37. Fill in the following information.						
□ 165.	Projected monthly plan payment if you were filing under	ar Chant	or 13	\$			
	Current multiplier for your district as stated on the list is	•		Ψ			
	Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	listricts in	n Alabama	X			
	To find a list of district multipliers that includes your district link specified in the separate instructions for this fobe available at the bankruptcy clerk's office.				Com	r total	
	Average monthly administrative expense if you were fil	ing unde	er Chapter 13	\$		=> \$ 	
	of the deductions for debt payment. es 33e through 36.					\$	307.45
Total Deduc	etions from Income						
38. Add all o	of the allowed deductions.						
	ne 24, All of the expenses allowed under IRS e allowances	\$_	6,726.3	1			
Copy lir	ne 32, All of the additional expense deductions	\$_	356.67	7_			
Copy lir	ne 37, All of the deductions for debt payment	+\$_	307.45	<u>5</u>			
	Total deductions	\$	7,390.43	Copy total	l here=	> \$	7,390.43
Part 3: Def	termine Whether There is a Presumption of Abuse						
39. Calculat	e monthly disposable income for 60 months						
39a. Co	ppy line 4, adjusted current monthly income	\$_	6,044.08	8_			
39b. Co	ppy line 38, <i>Total deductions</i>	- \$ _	7,390.43	3			
	onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$_	-1,346.3	Copy here=>\$	1	,346.35	
For the	next 60 months (5 years)				x 60		
39d. To	otal. Multiply line 39c by 60		\$	-80,781.00	Copy here=>	\$\$	781.00
40. Find out	whether there is a presumption of abuse. Check the	box tha	t applies:		_		
■ The I	line 39d is less than \$8,175*. On the top of page 1 of the	nis form,	check box 1, Th	ere is no presu	ımption of ab	use. Go to Part	5.
☐ The I	line 39d is more than \$13,650*. On the top of page 1 or 4 if you claim special circumstances. Go to Part 5.						
_	line 39d is at least \$8,175*, but not more than \$13,65	0*. Go to	o line 41.				
	to adjustment on 4/01/22, and every 3 years after that for			the date of adju	ustment.		

JOHN M ARCHIE

Debtor 1	JOH	IN M ARCHIE	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled a Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	()(I) \$ Copy here=> \$	
		Multiply line 41a by 0.25		
25	% of y	ne whether the income you have left over after subtracting all allowed do your unsecured, nonpriority debt. ne box that applies:	eductions is enough to pay	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Th</i> o Part 5.	nere is no presumption of abuse.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, ch umption of abuse. You may fill out Part 4 if you claim special circumstances.		
Part 4:	Giv	ve Details About Special Circumstances		
13. Do y reas	ou ha onable	we any special circumstances that justify additional expenses or adjustness alternative? 11 U.S.C. \S 707(b)(2)(B).	nents of current monthly income for v	which there is no
■ N	lo. Go	o to Part 5.		
□ Y		ll in the following information. All figures should reflect your average monthly em. You may include expenses you listed in line 25.	expense or income adjustment for each	
	ne	ou must give a detailed explanation of the special circumstances that make the ecessary and reasonable. You must also give your case trustee documentation ljustments.		
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
			\$	
	_		\$	
			\$	
	_		\$	
Part 5:	Sic	gn Below		
urt o.	_	gning here, I declare under penalty of perjury that the information on this state	ement and in any attachments is true an	d correct.
	X /s	/ JOHN M ARCHIE		
		DHN M ARCHIE gnature of Debtor 1		
Da		ay 21, 2019		
		M/DD/YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

	Sout	hern District of Mississip	pi		
In	re JOHN M ARCHIE		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy.	or agreed to be paid	to me, for services rendere	d or to
	For legal services, I have agreed to accept		\$	999.00	
	Prior to the filing of this statement I have received			999.00	
	Balance Due			0.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	pers and associates of my l	aw firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				m. A
6.	In return for the above-disclosed fee, I have agreed to a	render legal service for all aspec	ts of the bankruptcy of	ase, including:	
	a. Analysis of the debtor's financial situation, and rendb. Preparation and filing of any petition, schedules, state.c. Representation of the debtor at the meeting of creditd. [Other provisions as needed]	atement of affairs and plan which	may be required;		7;
7.	By agreement with the debtor(s), the above-disclosed for	ee does not include the following	g service:		
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of as bankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the debtor	(s) in
	May 21, 2019	/s/ Casey R. Varn			
	Date	Casey R. Varnad Signature of Attorne Varnado Law Fire 12178 Hwy 49 Ste. C	ey m		
		Gulfport, MS 395 228-896-3374 Fa varnadolawfirm@	x: 228-865-7879		

Name of law firm